Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
MIDDLE DISTRICT OF TENNESSEE	_	
Case number (if known)	Chapter11	
		☐ Check if this an amended filing
Official Form 201		

## Voluntary Petition for Non-Individuals Filing for Bankruptcy

06/22

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, Instructions for Bankruptcy Forms for Non-Individuals, is available.

1.	Debtor's name	ELEVENONE, INC.	
2.	All other names debtor used in the last 8 years Include any assumed names, trade names and doing business as names	DBA MOOYAH BURGERS FRIES & SHAKES	
3.	Debtor's federal Employer Identification Number (EIN)	87-4046184	
4.	Debtor's address	Principal place of business	Mailing address, if different from principal place of business
		107 JASMINE COURT	
		Gallatin, TN 37066	
		Number, Street, City, State & ZIP Code	P.O. Box, Number, Street, City, State & ZIP Code
		Sumner County	Location of principal assets, if different from principal place of business
			207 MAHARRIS DRIVE
			SUITE C Gallatin, TN 37066  Number, Street, City, State & ZIP Code
5.	Debtor's website (URL)		
6.	Type of debtor	Corporation (including Limited Liability Company (LLC	) and Limited Liability Partnership (LLP))
		☐ Partnership (excluding LLP)	
		☐ Other. Specify:	

When

When

Case number

Case number

years?

separate list.

Were prior bankruptcy

cases filed by or against

the debtor within the last 8

If more than 2 cases, attach a

No.

☐ Yes.

District

District

				3/01/24 1.021 W						
Debt	tor ELEVENONE, INC.		Case number (if known)							
10.	Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?	is ■ No a □ Yes.								
	List all cases. If more than 1 attach a separate list	, Debtor		Relationship Case number, if known						
11	Why is the case filed in	Check all that apply:								
• • • •	this district?	_	atanhahan at kantanan anada danhahan ata	a this district (as 400 days is a said fatal.						
		— Dobtor riad riad ito dominino, prii	cipal place of business, or principal assets in n or for a longer part of such 180 days than i							
			ebtor's affiliate, general partner, or partnersh	•						
12.	Does the debtor own or have possession of any	■ No								
	real property or personal property that needs	Yes. Answer below for each prop	Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.							
	immediate attention?	Why does the property nee	Why does the property need immediate attention? (Check all that apply.)							
		☐ It poses or is alleged to p	ose a threat of imminent and identifiable haz	zard to public health or safety.						
		What is the hazard?								
		$\square$ It needs to be physically	secured or protected from the weather.							
			ods or assets that could quickly deteriorate o , meat, dairy, produce, or securities-related a							
		☐ Other								
		Where is the property?								
		Is the property insured?	Number, Street, City, State & ZIP Code							
		□ No								
		☐ Yes. Insurance agency								
		Contact name								
		Phone								
	Statistical and admin	istrative information								
13.	Debtor's estimation of	. Check one:								
	available funds	Funds will be available for o	listribution to unsecured creditors.							
		☐ After any administrative exp	enses are paid, no funds will be available to	unsecured creditors.						
14.	Estimated number of	<b>■</b> 1-49	☐ 1,000-5,000	☐ 25,001-50,000						
	creditors	□ 50-99	☐ 5001-10,000	<b>5</b> 0,001-100,000						
		☐ 100-199	☐ 10,001-25,000	☐ More than100,000						
		□ 200-999								
15.	Estimated Assets	□ \$0 - \$50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion						
		□ \$50,001 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion						
		\$100,001 - \$500,000	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion						
		☐ \$500,001 - \$1 million	<b>—</b> \$100,000,001 - \$300 Hillion	inole trait 450 billiott						
16.	Estimated liabilities	□ \$0 - \$50,000	\$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion						

5/01/24 1:02PM

 Debtor
 ELEVENONE, INC.
 Case number (if known)

 Name
 \$50,001 - \$100,000
 \$10,000,001 - \$50 million
 \$1,000,000,001 - \$10 billion

 \$100,001 - \$500,000
 \$50,000,001 - \$100 million
 \$10,000,000,001 - \$50 billion

 \$500,001 - \$1 million
 \$100,000,001 - \$500 million
 More than \$50 billion

Debtor

		INC.

Name

Request for Relief, Declaration, and Signati
--

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on

May 1, 2024 MM / DD / YYYY

X	/s/ JOHN C. RIGHTMYER
	Signature of authorized representative of debtor

JOHN C. RIGHTMYER

Printed name

Case number (if known)

Title OWNER

18. Signature of attorney

X /s/ Jay R. Lefkovitz

Signature of attorney for debtor

Date May 1, 2024

MM / DD / YYYY

Jay R. Lefkovitz

Printed name

**LEFKOVITZ & LEFKOVITZ** 

Firm name

908 HARPETH VALLEY PLACE **NASHVILLE, TN 37221** 

Number, Street, City, State & ZIP Code

Contact phone

615-256-8300

Email address

jlefkovitz@lefkovitz.com

29856 TN

Bar number and State

Fill in this in				case:										
Debtor name	ELE	EVENC	NE, INC.							_				
United States	s Bankrı	iptcy Co	ourt for the:	MIDDLE [	DISTRICT O	F TENNES:	SEE			_				
Case numbe	r (if know	n)												
													if this is	an
													Ü	
Official F	orm 2	202												
Declar	atio	n U	nder	Penal	ty of F	Perjur	y for	Non-I	ndivi	dua	l De	bto	rs	12/15
An individua form for the s amendments and the date.	schedu of thos	les of a se docu	ssets and iments. Th	liabilities, ar is form mus	ny other doo	cument tha	at requires	a declarati	on that is	not inc	luded ir	the do	cument,	and any
WARNING connection v 1519, and 35	ith a b													
	Declara	tion an	d signatur	e										
				, or an autho tive of the de			oration; a me	ember or ar	authorize	d agent	of the p	artnersh	ip; or and	other
I have e	examine	d the in	formation in	the docume	ents checked	l below and	I I have a re	asonable b	elief that th	ne inforr	nation is	true and	d correct:	
	Sched	ule A/B	: Assets–R	eal and Perso	onal Property	y (Official Fo	orm 206A/B	3)						
				ho Have Clai			• •	,						
				Who Have U Contracts and		`		,						
				Official Form		200000 (0111	1010111 011111 2	.000)						
	Summ	ary of A	ssets and l	Liabilities for	Non-Individu	<i>ıal</i> s (Official	l Form 2069	Sum)						
		ded Sch		0 1:	( O !'( 1	A// 1 1 ()	h - 00 l			1 A	- NI-1 I		<u> </u>	004)
	•		•	<i>Cases: List c</i> ıires a declar		vno Have ti	ne 20 Large	est Unsecur	ea Claims	ana Ar	e ivot ins	siaers (O	πiciai Foi	m 204)
_						and acreast								
i deciai	e under	penaity	or perjury	that the foreg	joing is true	and correct								
Execu	ted on	May	1, 2024				SHTMYER		of dobtor					
							dual signing	y on benalf	oi debloi					
						C. RIGHT	TMYER							
					Printed	name								
					OWNE	-R								

Official Form 202

**Declaration Under Penalty of Perjury for Non-Individual Debtors** 

Position or relationship to debtor

Fill in this information to identify the case:	
Debtor name ELEVENONE, INC.	
United States Bankruptcy Court for the: MIDDLE DISTRICT OF TENNESSEE	☐ Check if this is an
Case number (if known):	amended filing

### Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. It claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		t and deduction for d claim.
		and government contracts)		Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
CELTIC BANK 268 S STATE ST SUITE 300 Salt Lake City, UT 84110		ALL BUSINESS ASSETS		\$869,963.00	\$0.00	\$869,963.00
FORWARD FINANCE 53 STATE ST, 20TH FLOOR Boston, MA 02109		WILSON BANK & TRUST - CHECKING - Acct# 0628		\$46,200.00	\$9,000.00	\$37,200.00
ONDECK 1400 BROADWAY New York, NY 10018						\$77,103.00
ONDECK 1400 BROADWAY New York, NY 10018						\$43,560.00

Fill in this information to identify the case:	
Debtor name ELEVENONE, INC.	
United States Bankruptcy Court for the: MIDDLE DISTRICT OF TENNESSEE	
Case number (if known)	☐ Check if this is an amended filing

### Official Form 206Sum

# Summary of Assets and Liabilities for Non-Individuals

12/15

-	minary of Assets and Elabinites for Non-marviadas		12/13
Par	t 1: Summary of Assets		
1.	Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B)		
	1a. <b>Real property:</b> Copy line 88 from <i>Schedule A/B</i>	\$_	0.00
	1b. <b>Total personal property:</b> Copy line 91A from <i>Schedule A/B</i>	\$_	313,460.45
	1c. <b>Total of all property:</b> Copy line 92 from <i>Schedule A/B</i>	\$_	313,460.45
Par	t 2: Summary of Liabilities		
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D	\$_	916,163.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)		
	3a. Total claim amounts of priority unsecured claims:  Copy the total claims from Part 1 from line 5a of Schedule E/F	\$_	0.00
	<b>3b. Total amount of claims of nonpriority amount of unsecured claims:</b> Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$_	120,663.00
4.	Total liabilities	\$	1,036,826.00

				5/01/24 1:02PM
Fill in	n this information to identify the case:			
Debt	or name ELEVENONE, INC.			
Linita	d States Bankruptcy Court for the: MIDDLE DISTRIC	PT OF TENNIESSEE		
Onite	d States Bankruptcy Court for the.	, I OF TEININESSEE		
Case	number (if known)			☐ Check if this is an
				amended filing
				-
Ott	isial Farm 200A/D			
	icial Form 206A/B			
Sc	hedule A/B: Assets - Real	and Personal Pro	perty	12/15
	ose all property, real and personal, which the debto de all property in which the debtor holds rights and			
which	have no book value, such as fully depreciated ass	ets or assets that were not capitalize	zed. In Schedule A/B,	list any executory contracts
or un	expired leases. Also list them on Schedule G: Exec	utory Contracts and Unexpired Lea	ses (Official Form 206	6G).
	complete and accurate as possible. If more space ebtor's name and case number (if known). Also ide			
	onal sheet is attached, include the amounts from the			ormation applies. If an
For F	Part 1 through Part 11, list each asset under the app	propriate category or attach separat	e supporting schedul	es. such as a fixed asset
sche	dule or depreciation schedule, that gives the detail	s for each asset in a particular cate	gory. List each asset	only once. In valuing the
Part	or's interest, do not deduct the value of secured cla	ims. See the instructions to unders	stand the terms used i	in this form.
1. <b>Do</b>	es the debtor have any cash or cash equivalents?			
П	No. Go to Part 2.			
_	Yes Fill in the information below.			
Al	cash or cash equivalents owned or controlled by t	he debtor		Current value of
				debtor's interest
3.	Checking, savings, money market, or financial I Name of institution (bank or brokerage firm)	brokerage accounts (Identify all)  Type of account	Last 4 digits of acc	rount
	radile of moditation (bank of brokerage initi)	Type of decount	number	ount
	. WILCON DANK & TRUCT	CHECKING	0639	¢0,000,00
	3.1. WILSON BANK & TRUST	CHECKING	0628	\$9,000.00
-				
4.	Other cash equivalents (Identify all)			
5.	Total of Part 1.			\$9,000.00
	Add lines 2 through 4 (including amounts on any ad	ditional sheets). Copy the total to line	e 80.	
Part :	<u> </u>			
6. <b>Do</b>	es the debtor have any deposits or prepayments?			
	No. Go to Part 3.			
	Yes Fill in the information below.			
7.	Deposits, including security deposits and utility	/ deposits		
	Description, including name of holder of deposit			
	0.4.1.4.T.N.E.I.E.O.T.D.I.O.(\$500), 0.4.1.4	TIN BURL 10 LITH ITIES (\$500) A		Å4 500 00
	7.1. GALLATIN ELECTRIC (\$500), GALLA	TIN PUBLIC UTILITIES (\$500), N	NUCU-GAS (\$500)	\$1,500.00
8.	Prepayments, including prepayments on execut	tory contracts, leases, insurance, to	axes, and rent	
٥.	Description, including name of holder of prepayment			
•	T. 1. 4D. 10			
9.	Total of Part 2.			\$1,500.00
	Add lines 7 through 8. Copy the total to line 81.			1

Official Form 206A/B

Schedule A/B Assets - Real and Personal Property

page 1

Debtor			Case	e number (If known)	
	Name				
Part 3:	Accounts receivable				
10. <b>Doe</b> :	s the debtor have any account	s receivable?			
■ N	o. Go to Part 4.				
☐ Y	es Fill in the information below.				
Part 4:	Investments				
	s the debtor own any investme	ents?			
■ N	o. Go to Part 5.				
	es Fill in the information below.				
Part 5:	Inventory, excluding agrics the debtor own any inventory		ssets)?		
	·	(excluding agriculture a	33013):		
	o. Go to Part 6. es Fill in the information below.				
	General description	Date of the last	Net book value of	Valuation method used	Current value of
	General description	physical inventory	debtor's interest (Where available)	for current value	debtor's interest
19.	Raw materials				
20.	Work in progress				
21.	Finished goods, including go	oods held for resale			
22.	Other inventory or supplies PERISHABLE FOODS		\$11,800.00		\$11,800.00
				_	
23.	Total of Part 5.			_	\$11,800.00
	Add lines 19 through 22. Copy				
24.	Is any of the property listed i ☐ No	n Part 5 perishable?			
	Yes				
25.	Has any of the property listed  ☐ No	d in Part 5 been purchase	d within 20 days before th	ne bankruptcy was filed?	
	Yes. Book value	<b>11,800.00</b> Valuation i	method	Current Value	11,800.00
26.	Has any of the property listed ■ No	d in Part 5 been appraised	d by a professional within	the last year?	
	□ Yes				
Part 6:	Farming and fishing-relat	ed assets (other than title	ed motor vehicles and lan	d)	
27. <b>Doe</b> :	s the debtor own or lease any			-	
■ N	o. Go to Part 7.				
☐ Y	es Fill in the information below.				
Part 7:	Office furniture, fixtures,	and aquinment: and calle	netibles		
Part 7: 38. <b>Doe</b> :	s the debtor own or lease any			s?	
	o. Go to Part 9				

Official Form 206A/B

Schedule A/B Assets - Real and Personal Property

Debtor	<b>.</b>	Case	number (If known)	
	Name			
☐ Ye	es Fill in the information below.			
Part 8:	Machinery, equipment, and vehicles			
46. <b>Doe</b> s	s the debtor own or lease any machinery, equipme	nt, or vehicles?		
□ N	o. Go to Part 9.			
■ Ye	es Fill in the information below.			
	General description Include year, make, model, and identification number (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47.	Automobiles, vans, trucks, motorcycles, trailers,	and titled farm vehicles		
	47.1. 5&8 ENCLOSED TRAILER	\$2,500.00	-	\$2,500.00
48.	Watercraft, trailers, motors, and related accessor floating homes, personal watercraft, and fishing vess		otors,	
49.	Aircraft and accessories			
50.	Other machinery, fixtures, and equipment (exclude machinery and equipment) SEE ATTACHED	ling farm \$288,660.45	Depreciation	\$288,660.45
				· ·
			_	
51.	Total of Part 8.			\$291,160.45
	Add lines 47 through 50. Copy the total to line 87.			
52.	ls a depreciation schedule available for any of the	e property listed in Part 8?		
	■ No □ Yes			
53.	Has any of the property listed in Part 8 been appr  ■ No	aised by a professional within	the last year?	
	□ Yes			
Part 9:	Real property			
	s the debtor own or lease any real property?			
<b>■</b> N	o. Go to Part 10.			
	es Fill in the information below.			
Part 10:				
59. <b>Doe</b> s	s the debtor have any interests in intangibles or int	tellectual property?		
■ N	o. Go to Part 11.			
☐ Ye	es Fill in the information below.			
Part 11:	All other assets			
70. <b>Doe</b> s	s the debtor own any other assets that have not ye			
Inclu	ide all interests in executory contracts and unexpired le	eases not previously reported on	this form.	
	o. Go to Part 12.			
☐ Ye	es Fill in the information below.			

Official Form 206A/B

Schedule A/B Assets - Real and Personal Property

Debtor **ELEVENONE**, **INC**.

Nam

Case number (If known) \_

Part 12: Summary

Current value of personal property	Current value of real property
\$9,000.00	
\$1,500.00	
\$0.00	
\$0.00	
\$11,800.00	
\$0.00	
\$0.00	
\$291,160.45	
>	\$0.00
\$0.00	
+\$0.00	
\$313,460.45	+ 91b. <b>\$0.00</b>
	\$9,000.00 \$1,500.00 \$0.00 \$0.00 \$11,800.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$291,160.45

Table 1

		iui	JIE I		
Asset #	Asset Description	Date Placed in Service	Disposal Date	Cost	Current Net Book Value
1	Walk in Cooler / Freezer	3/1/2023		\$37,676.00	\$37,678.00
2	Walk in Cooler Shelving	3/1/2023		\$907.00	\$909.00
3	Dunnage Rack	3/1/2023		\$225.00	\$227.00
4	Retarder Cabinet	3/1/2023		\$975.00	\$977.00
5	Water Filtration System	3/1/2023		\$678.00	\$680.00
6	Wire Shelving above Mop Sink	3/1/2023		\$66.00	\$68.00
7	Three Compartment Sink	3/1/2023		\$1,590.00	\$1,592.00
8	Pre-Rinse Faucet Assembly	3/1/2023		\$293.00	\$295.00
9	Wire Wall Shelving	3/1/2023		\$261.00	\$263.00
10	Two Compartment Sink	3/1/2023		\$2,811.00	\$2,813.00
11	Pre-Rinse Faucet Assembly	3/1/2023		\$293.00	\$295.00
12	Drain, Lever	3/1/2023		\$128.00	\$130.00
13	Wire Wall Shelving	3/1/2023		\$257.00	\$259.00
14	Potato Peeler Bracket	3/1/2023		\$173.00	\$175.00
15	French Fry Cutter	3/1/2023		\$313.00	\$315.00
16	Bun/Sheet Pan Rack	3/1/2023		\$494.00	\$496.00
17	Dish Shelving (5 tier)	3/1/2023		\$231.00	\$233.00
18	Hand Sink (x2)	3/1/2023		\$624.00	\$626.00
19	Storage Shelving	3/1/2023		\$1,506.00	\$1,508.00
20	Work Table 48"	3/1/2023		\$1,034.00	\$1,036.00
21	Wire Wall Shelving	3/1/2023		\$142.00	\$144.00
22	above prep Dunnage Rack	3/1/2023		\$142.00	\$144.00
22	Dulllaye Rack	3/ 1/2023		φου.υυ	φο∠.00

23	Managers Desk w/wire shelving	3/1/2023	\$203.00	\$205.00
24	Convection Oven / Proofer	3/1/2023	\$8,235.00	\$8,237.00
	Cabinet / Enclosed			
25	Bun /food pan	3/1/2023	\$1,145.00	\$1,147.00
26	Shake Station	3/1/2023	\$2,995.00	\$2,997.00
27	Mixer - Vitamix	3/1/2023	\$670.00	\$672.00
28	Check Minder - Ticket Holder	3/1/2023	\$32.00	\$34.00
29	Shake Machine	3/1/2023	\$5,050.00	\$5,052.00
30	Stainless Steel Wall Panels/ Exhaust Hood / Fan	3/1/2023	\$36,165.00	\$36,167.00
30	Package French Fry	3/1/2023	φ30,103.00	φ30, 10 <i>1</i> .00
31	Warmer	3/1/2023	\$2,121.00	\$2,123.00
32	Henny Penny Gas Fryer	3/1/2023	\$28,138.00	\$28,140.00
33	Chef Base Fridge	3/1/2023	\$10,820.00	\$10,822.00
34	Griddle Gas, Countertop	3/1/2023	\$8,100.00	\$8,102.00
35	Griddle Gas Countertop	3/1/2023	\$2,758.00	\$2,760.00
36	Mobile Stand	3/1/2023	\$513.00	\$515.00
37	Printer Shelf - Wire	3/1/2023	\$82.00	\$84.00
38	Sandwich Prep Refrigerator	3/1/2023	\$5,180.00	\$5,182.00
	Wire Wall Shelving above prep		¥3,	***,
39	table	3/1/2023	\$332.00	\$334.00
40	Finishing Table	3/1/2023	\$2,773.00	\$2,775.00
41	Wire shelving under table	3/1/2023	\$200.00	\$202.00
42	Hot Food Well	3/1/2023	\$465.00	\$467.00
43	3rd Party Staging Station wire shelves	3/1/2023	\$312.00	\$314.00
44	Order Counter	3/1/2023	\$5,813.00	\$5,815.00
	Shelving units	5 2020	ψο,ο το.οο	ψο,ο το.οο
45	under counter	3/1/2023	\$224.00	\$226.00
46	Beverage Bar, Cabinet Base Doors	3/1/2023	\$9,048.00	\$9,050.00
			•	

47	Ice Maker	Ice Maker 3/1/2023 \$5,348.00		\$5,350.00
48	Iced Tea Brewer	3/1/2023	\$824.00	\$826.00
49	Tea/Coffee Dispensor	3/1/2023	\$194.00	\$196.00
50	Trash Receptacles (6)	3/1/2023	\$3,072.00	\$3,074.00
51	30" x 24" Table	3/1/2023	\$352.00	\$354.00
52	30" x 24" ADA Table	3/1/2023	\$1,251.00	\$1,253.00
53	48" Single Booth (x2) 48" Double	3/1/2023	\$952.00	\$954.00
54	Booth (x4)	3/1/2023	\$3,164.00	\$3,166.00
55	Corner Booth	3/1/2023	\$4,055.00	\$4,057.00
56	30" x 48" Freestanding Tables (x5)	3/1/2023	\$1,475.00	\$1,477.00
57	30" x 8" Booth Table (x5)	3/1/2023	\$1,475.00	\$1,477.00
58	Corner Booth Table	3/1/2023	\$596.00	\$598.00
59	Chairs (x38)	3/1/2023	\$2,736.00	\$2,738.00
	Base	0/ 1/2020	ΨΞ,1 00.00	Ψ2,. σσ.σσ
60	Assembly	3/1/2023	\$290.00	\$292.00
61	Drain, Lever / Twist Waste	3/1/2023	\$192.00	\$194.00
62	Worktop Freezer	3/1/2023	\$3,122.00	\$3,124.00
63	Banquet Booth	3/1/2023	\$1,535.00	\$1,537.00
64	2nd Worktop Freezer	3/1/2023	\$3,122.00	\$3,124.00
65	Sheet Pan Racks w/ Accessories (x3)	3/1/2023	\$745.50	\$747.50
66	smallwares	3/1/2023	\$10,459.41	\$10,461.41
67	Custom Sign	3/1/2023	\$6,298.31	\$6,300.31
07	Baby Stations/	3/1/2023	φ0,290.31	φ0,300.31
68	Towel Dispensors	3/1/2023	\$450.48	\$452.48
69	Graphics Package	3/1/2023	\$2,299.00	\$2,301.00
70	Lighting Package	3/1/2023	\$8,691.00	\$8,693.00
71	5 x 8 Enclosed Trailer	1/1/2024	\$2,266.51	\$2,268.51
72	Customer Counter (kiosks)	3/1/2023	\$920.00	\$922.00

73	Outdoor Table (x5)	3/1/2023	\$1,270.00	\$1,272.00
74	Outdoor Chairs ( x8)	3/1/2023	\$2,217.00	\$2,219.00
75	Fabricated Grease Duct System	3/1/2023	\$19,139.00	\$19,141.00
76	POS terminals, printers, cables, software	3/1/2023	\$11,647.00	\$11,649.00
	Kiosks (X2) w/ hardware & accessories	3/1/2023	\$6,217.24	\$6,219.24
Totals			\$288,506.45	\$288,660.45

				5/01/24 1:02PI
Fill	in this information to identify the c	case:		
Del	otor name <b>ELEVENONE</b> , <b>INC</b> .			
Hei	ted States Bankruptcy Court for the:	MIDDLE DISTRICT OF TENNESSEE		
Uni	led States Bankruptcy Court for the.	MIDDLE DISTRICT OF TENNESSEE		
Cas	se number (if known)			Check if this is an
			_	amended filing
<u> </u>	".'.I F 000D			-
	ficial Form 206D		_	
Sc	chedule D: Creditors	Who Have Claims Secured by Pro	operty	12/15
Веа	s complete and accurate as possible.			
1. D	any creditors have claims secured by	• • •		
	_	age 1 of this form to the court with debtor's other schedules. I	Debtor has nothing else to	report on this form.
	Yes. Fill in all of the information be			
	t 1: List Creditors Who Have Se		Column A	Column B
	ist in alphabetical order all creditors wh m, list the creditor separately for each clain	no have secured claims. If a creditor has more than one secured n.	Amount of claim	Value of collateral
			Do not deduct the value	that supports this claim
2.1	CELTIC BANK	Describe debtor's property that is subject to a lien	of collateral. \$869,963.00	\$0.00
2.1	Creditor's Name	ALL BUSINESS ASSETS	Ψουσ,σοσ.σο	Ψ0.00
	268 S STATE ST			
	SUITE 300 Salt Lake City, UT 84110			
	Creditor's mailing address	Describe the lien		
		Is the creditor an insider or related party?		
		■ No		
	Creditor's email address, if known	Yes		
	Date debt was incurred	Is anyone else liable on this claim?  ☐ No		
		Yes. Fill out Schedule H: Codebtors (Official Form 206H)		
	Last 4 digits of account number	,		
	Do multiple creditors have an	As of the petition filing date, the claim is:		
	interest in the same property?	Check all that apply ☐ Contingent		
	<ul><li>■ No</li><li>□ Yes. Specify each creditor,</li></ul>	☐ Unliquidated		
	including this creditor and its relative	☐ Disputed		
	priority.			
			<b>A40.000.00</b>	<b>***</b>
2.2	FORWARD FINANCE Creditor's Name	Describe debtor's property that is subject to a lien WILSON BANK & TRUST - CHECKING - Acct#	\$46,200.00	\$9,000.00
	53 STATE ST, 20TH FLOOR	0628		
	Boston, MA 02109			
	Creditor's mailing address	Describe the lien		
		Is the creditor an insider or related party?		
		No		
	Creditor's email address, if known	Yes		
	Date debt was incurred	Is anyone else liable on this claim?  ☐ No		
		Yes. Fill out Schedule H: Codebtors (Official Form 206H)		
	Last 4 digits of account number	,		
	Do multiple creditors have an	As of the petition filing date, the claim is:		
	interest in the same property?	Check all that apply		

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

,,		e number (if known)		
Name  ■ No □ Yes. Specify each creditor, including this creditor and its relative priority.	☐ Contingent ☐ Unliquidated ☐ Disputed			
Total of the dollar amounts from Part  Part 2: List Others to Be Notified for	1, Column A, including the amounts from the Addition	al Page, if any. \$916,163.00		
	must be notified for a debt already listed in Part 1. Exa	mples of entities that may be listed are	collection agencies,	
If no others need to notified for the debts Name and address	listed in Part 1, do not fill out or submit this page. If ad	ditional pages are needed, copy this p On which line in Part 1 did you enter the related creditor?	age. Last 4 digits of account number for this entity	
CORPORATION SERVICE C PO BOX 2576 Springfield, IL 62708	OMPANY	Line <b>2.2</b>	_	

					5/01/24 1:02PM
Fill in	this information to identify the case:				
Debto	or name <b>ELEVENONE, INC.</b>				
Unite	d States Bankruptcy Court for the: MIDDLE DISTRIC	CT OF TENNESSEE			
Case	number (if known)				
					Check if this is an amended filing
∩ffi	cial Form 206E/F				
	nedule E/F: Creditors Who Ha	ave Unsecured	d Clain	ns	12/15
	complete and accurate as possible. Use Part 1 for credito				
Person	e other party to any executory contracts or unexpired least all Property (Official Form 206A/B) and on <i>Schedule G: Ex</i> be boxes on the left. If more space is needed for Part 1 or F	xecutory Contracts and Une	expired Leas	ses (Official Form 206G). Numb	er the entries in Parts 1 and
Part 1	List All Creditors with PRIORITY Unsecured C	Claims			
1.	Do any creditors have priority unsecured claims? (See	11 U.S.C. § 507).			
	■ No. Go to Part 2.				
	Yes. Go to line 2.				
Part 2	List All Creditors with NONPRIORITY Unsecu  List in alphabetical order all of the creditors with nonpi		the debter be	as more than 6 graditare with non	priority upgopured alaims, fill
3	out and attach the Additional Page of Part 2.	nonty unsecured claims.	ine debior na	as more man o creditors with non	
					Amount of claim
3.1	Nonpriority creditor's name and mailing address		ing date, the	e claim is: Check all that apply.	\$77,103.00
	ONDECK 1400 BROADWAY	☐ Contingent☐ Unliquidated			
	New York, NY 10018	☐ Unliquidated ☐ Disputed			
	Date(s) debt was incurred _	Basis for the claim:			
	Last 4 digits of account number _		_	_	
		Is the claim subject to	o offset?	No ☐ Yes	
3.2	Nonpriority creditor's name and mailing address	As of the petition fil	ing date, the	e claim is: Check all that apply.	\$43,560.00
	ONDECK	☐ Contingent			
	1400 BROADWAY New York, NY 10018	Unliquidated			
	Date(s) debt was incurred	☐ Disputed			
	=	Basis for the claim:	_		
	Last 4 digits of account number _	Is the claim subject to	o offset?	No  Yes	
Part 3	List Others to Be Notified About Unsecured C	Claims			
	in alphabetical order any others who must be notified for gnees of claims listed above, and attorneys for unsecured cre		12. Example:	s of entities that may be listed are	e collection agencies,
If no	o others need to be notified for the debts listed in Parts 1	and 2, do not fill out or sub	mit this pag	e. If additional pages are need	ed, copy the next page.
	Name and mailing address			line in Part1 or Part 2 is the editor (if any) listed?	Last 4 digits of account number, if
					any
Part 4	4: Total Amounts of the Priority and Nonpriority	Unsecured Claims			
5. Add	I the amounts of priority and nonpriority unsecured claim	s.			
5a. To	otal claims from Part 1		5a.	Total of claim amounts \$	0.00
	otal claims from Part 2		5b. +		
E- T	atel of Davis 4 and 2				
	otal of Parts 1 and 2 nes 5a + 5b = 5c.		5c.	\$120	0,663.00

Official Form 206E/F

				5/01/24 1:02PM
Fill in	this information to identify the case:			
Debtor	name <b>ELEVENONE</b> , <b>INC</b> .			
United	States Bankruptcy Court for the: MID	DLE DISTRICT OF TENNES	SSEE	
Case r	number (if known)			
				☐ Check if this is an amended filing
Offic	ial Form 206G			
Sch	edule G: Executory C	ontracts and U	nexpired Leases	12/15
□ ■ (Official	No. Check this box and file this form wing Yes. Fill in all of the information below Form 206A/B).	th the debtor's other schedul even if the contacts of leases	es. There is nothing else to report on t s are listed on <i>Schedule A/B: Assets - F</i>	Real and Personal Property
2. Lis	t all contracts and unexpired leas		State the name and mailing add whom the debtor has an execut lease	-
2.1.	State what the contract or lease is for and the nature of the debtor's interest	COMMERICAL LEASE ON 2400 SQUARE FEET FOR OPERATING DEBTOR'S RESTAURANT	<b>S</b>	
	State the term remaining  List the contract number of any government contract	APPROX. 9 YEARS	EFC WINDSONG LLC 2820 SELWYN AVENUE Charlotte, NC 28209	

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

				5/01/24 1:02PM
Fill in th	is information to identify	the case:		
Debtor n	name ELEVENONE, IN	IC.		
I Initad S	States Bankruntov Court for	the: MIDDLE DISTRICT OF TENNES	SSEE	
Officed C	nates bankruptcy Court for	me. Middle biothlot of Telvive		
Case nu	mber (if known)		-	☐ Check if this is an amended filing
Offici	al Form 206H			
_	ai Foilli 2006 dule H: Your C	adabtara		40/45
Scrie	dule II. Toul C	OUEDIOI 3		12/15
	mplete and accurate as pale al Page to this page.	ossible. If more space is needed, co	py the Additional Page, numbering the entrie	s consecutively. Attach the
1. D	o you have any codebtors	?		
□ No. C	Check this box and submit th	nis form to the court with the debtor's or	ther schedules. Nothing else needs to be reported	ed on this form.
cred	ditors, Schedules D-G. Inc	ude all guarantors and co-obligors. In	e also liable for any debts listed by the debtor Column 2, identify the creditor to whom the debt e than one creditor, list each creditor separately Column 2: Creditor	is owed and each schedule
	Name	Mailing Address	Name	Check all schedules that apply:
2.1	ERIN RIGHTMYER	107 JASMINE CT Gallatin, TN 37066	CELTIC BANK	■ D <u>2.1</u> □ E/F
2.2	JOHN C. RIGHTMYER	107 JASMINE COURT Gallatin, TN 37066	CELTIC BANK	■ D <u><b>2.1</b></u> □ E/F □ G
2.3	JOHN C. RIGHTMYER	107 JASMINE COURT Gallatin, TN 37066	FORWARD FINANCE	■ D <u>2.2</u> □ E/F □ G
2.4	JOHN C. RIGHTMYER	107 JASMINE COURT Gallatin, TN 37066	ONDECK	□ D ■ E/F <b>3.1</b> □ G
2.5	JOHN C. RIGHTMYER	107 JASMINE COURT Gallatin, TN 37066	ONDECK	□ D ■ E/F <b>3.2</b> □ G

Official Form 206H Schedule H: Your Codebtors Page 1 of 2

Debtor **ELEVENONE, INC.** Case number (if known)

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

\*\*Column 1: Codebtor\*\*

\*\*Column 2: Creditor\*\*

Official Form 206H Schedule H: Your Codebtors Page 2 of 2

Fill in	this information to identify the case:					
Debto	r name <b>ELEVENONE, INC.</b>					
United	States Bankruptcy Court for the: MIDDLE DISTRICT	OF TENNESSEE				
Case	number (if known)					
Cusc						Check if this is an amended filing
	cial Form 207					
The de	ement of Financial Affairs for No ebtor must answer every question. If more space is no he debtor's name and case number (if known).					04/22 any additional pages,
Part 1	Income					
1. <b>Gr</b>	oss revenue from business					
	None.					
	dentify the beginning and ending dates of the debtor which may be a calendar year	's fiscal year,	Sources Check all	of revenue that apply		Gross revenue (before deductions and exclusions)
	From the beginning of the fiscal year to filing da	ate:	☐ Operat	ing a business GROSS BUSI	NESS	\$325,138.00
_	<b></b>		■ Other	REVENUE		
	For prior year: From 1/01/2023 to 12/31/2023		_	ing a business GROSS BUSI REVENUE	NESS	\$1,016,592.00
	For year before that: From 1/01/2022 to 12/31/2022		_	ing a business GROSS BUSI REVENUE	NESS	\$0.00
Inc	n-business revenue lude revenue regardless of whether that revenue is taxab d royalties. List each source and the gross revenue for ea		•	•		ney collected from lawsuits,
	None.					
			Descripti	on of sources of	revenue	Gross revenue from each source (before deductions and exclusions)
Part 2	List Certain Transfers Made Before Filing for Bar	nkruptcy				
Lis filir	rtain payments or transfers to creditors within 90 day t payments or transfersincluding expense reimbursements this case unless the aggregate value of all property traditions agreed that with respect to cases filed on or	ntsto any credito nsferred to that c	or, other than reditor is less			
	None.					
C	Creditor's Name and Address	Dates	Total ar	nount of value	Reasons for Check all that	r payment or transfer at apply

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

Debtor **ELEVENONE**, **INC**. Case number (if known)

	Cred	itor's Name and Address	D	ates	Total amount of value	Reasons for payi	
	3.1.	CELTIC BANK 268 S STATE ST SUITE 300 Salt Lake City, UT 84110	2/	/16/2024	\$12,428.81	■ Secured debt □ Unsecured load □ Suppliers or vel □ Services □ Other	n repayments
4.	List pay or cosig may be listed in	nts or other transfers of property many ments or transfers, including expense right of by an insider unless the aggregate adjusted on 4/01/25 and every 3 years a line 3. <i>Insiders</i> include officers, directo and their relatives; affiliates of the debto	eimbursements, value of all propafter that with research	, made within 1 ye perty transferred to espect to cases file in control of a corp	ar before filing this case on o or for the benefit of the inse ed on or after the date of ad orate debtor and their relati	debts owed to an ir sider is less than \$7 ljustment.) Do not in ives; general partne	575. (This amount clude any payments rs of a partnership
		er's name and address	D	ates	Total amount of value	Reasons for payi	ment or transfer
		er's name and address tionship to debtor	D	aics	rotal amount of value	iveasons for havi	Helit OF HAIISIEF
5.	List all	sessions, foreclosures, and returns property of the debtor that was obtained osure sale, transferred by a deed in lieune					I by a creditor, sold at
	Cred	itor's name and address	Describe of	the Property		Pate	Value of property
6.	of the d	r creditor, including a bank or financial in lebtor without permission or refused to n					
	■ No	ne					
	Cred	itor's name and address	Description	of the action cred		Date action was aken	Amount
P	art 3:	Legal Actions or Assignments					
7.	List the	actions, administrative proceedings, a legal actions, proceedings, investigatio capacity—within 1 year before filing this	ns, arbitrations,	executions, attac mediations, and a	hments, or governmental udits by federal or state ago	audits encies in which the	debtor was involved
	■ No	ne.					
		Case title Case number	Nature of ca		rt or agency's name and ress	Status of ca	se
8.	List any	ments and receivership r property in the hands of an assignee for r, custodian, or other court-appointed of				s case and any prop	erty in the hands of a
	■ No	ne					
P	art 4:	Certain Gifts and Charitable Contribu	utions				
9.		gifts or charitable contributions the sist to that recipient is less than \$1,000		a recipient within	n 2 years before filing this	case unless the a	ggregate value of
	■ No	ne					

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

Recipient's name and address Description of the gifts or contributions Dates given Value Part 5: Certain Losses 10. All losses from fire, theft, or other casualty within 1 year before filing this case. Description of the property lost and Amount of payments received for the loss **Dates of loss** Value of property how the loss occurred lost If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets - Real and Personal Property). Part 6: Certain Payments or Transfers 11. Payments related to bankruptcy List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case. ☐ None. Who was paid or who received If not money, describe any property transferred Total amount or the transfer? value Address 11.1. LEFKOVITZ & LEFKOVITZ Attorney Fees \$15000 908 HARPETH VALLEY Court Costs \$1738 **PLACE** Return Check Fee - \$35 \$16,773.00 **NASHVILLE, TN 37221 Email or website address** jlefkovitz@lefkovitz.com Who made the payment, if not debtor? 12. Self-settled trusts of which the debtor is a beneficiary List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device. Do not include transfers already listed on this statement. None. Name of trust or device **Dates transfers** Total amount or Describe any property transferred were made value 13. Transfers not already listed on this statement List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement. None.

#### Part 7: Previous Locations

**Address** 

Who received transfer?

#### Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

Description of property transferred or

payments received or debts paid in exchange

value

Total amount or

Date transfer

was made

moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

■ None

Financial Institution name and Last 4 digits of Type of account or Date account was Last balance before closing or Address closed, sold, account number instrument moved, or transfer transferred

#### 19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

None

Depository institution name and address Names of anyone with Description of the contents Does debtor access to it still have it? **Address** 

#### 20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

None

**Business name address** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. **Dates business existed** 

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

page 5

7.1	JOHN C. RIGHTMYER				
	Name and address of the person who has possession of inventory records				

**FOOD** INVENTORY

APPROX. \$11,000 IN FEED EACH WEEK

**ELEVENONE, INC. 107 JASMINE COURT** Gallatin, TN 37066

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any	% of interest, if
		interest	any
JOHN C. RIGHTMYER	107 JASMINE COURT Gallatin, TN 37066	CO-OWNER	50

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

5/01/24 1:02PM Debtor ELEVENONE, INC. Case number (if known) Name Address Position and nature of any % of interest, if interest any **CO-OWNER ERIN RIGHTMYER 107 JASMINE CT** 50 Gallatin, TN 37066 29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions? No Yes. Identify below. 30. Payments, distributions, or withdrawals credited or given to insiders Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised? No Yes. Identify below. Name and address of recipient Amount of money or description and value of **Dates** Reason for providing the value property WORK 30.1 **OVER THE PERFORMED** JOHN C. RIGHTMYER PRIOR 12 **MANAGING & 107 JASMINE COURT MONTHS TO RUNNING** Gallatin, TN 37066 \$5,833 PER MONTH **PRESENT BUSINESS** Relationship to debtor **CO-OWNER OVER THE** 

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

\$2500 PER MONTH

30.2

☐ Yes. Identify below.

Name of the parent corporation

**ERIN RIGHTMYER** 

**107 JASMINE CT** 

Gallatin, TN 37066

Relationship to debtor **CO-OWNER** 

> Employer Identification number of the parent corporation

PRIOR 12

**PRESENT** 

**MONTHS TO** 

WORK

PERFORMED FOR

THE BUSINESS

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

Nο

Yes. Identify below.

Name of the pension fund

Employer Identification number of the pension

fund

Official Form 207

Debtor **ELEVENONE**, **INC**. Case number (if known)

#### Part 14: Signature and Declaration

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this Statement of Financial Affairs and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on May 1, 2024

/s/ JOHN C. RIGHTMYER

Signature of individual signing on behalf of the debtor

Position or relationship to debtor OWNER

May 1, 2024

JOHN C. RIGHTMYER

Printed name

Are additional pages to Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy (Official Form 207) attached?

■ No

☐ Yes

	EL EVENONE						N		
In re	ELEVENONE,	INC.			Debtor(s)		se No. apter	11	
					Deotor(s)	CII	ирист		
	DIS	CLO	OSURE OF COM	MPENSATIO	ON OF ATT	ORNEY FO	R DE	CBTOR(S)	
c	ompensation paid to	me v	29(a) and Fed. Bankr. F within one year before t e debtor(s) in contemp	the filing of the p	etition in bankrup	tcy, or agreed to	e paid	to me, for services rendere	ed or to
	For legal service	es, I h	ave agreed to accept			\$		15,000.00	
			nis statement I have rec					15,000.00	
	Balance Due					\$		0.00	
2. T	he source of the cor	npens	ation paid to me was:						
	Debtor		Other (specify):						
3. T	The source of compe	nsatio	n to be paid to me is:						
	Debtor		Other (specify):						
4. <b>I</b>	I have not agreed	l to sh	are the above-disclosed	d compensation v	with any other pers	son unless they a	e meml	pers and associates of my l	law firm.
[			the above-disclosed co together with a list of					or associates of my law finched.	rm. A
5. I	n return for the above	ve-dis	closed fee, I have agree	ed to render legal	service for all asp	pects of the bankr	uptcy c	ase, including:	
b c	<ul> <li>Preparation and fi</li> <li>Representation of</li> <li>[Other provisions</li> <li>Negotiatio</li> </ul>	iling of the d as ne ons w	of any petition, schedule btor at the meeting of eded]	es, statement of a creditors and con	ffairs and plan wl nfirmation hearing market value;	nich may be requi g, and any adjourn exemption pla	red; ned hear nning;	preparation and filing	
6. E	Represent reaffirmati representa motions to	tatior ion a ation o app	greements and app in any loan modific rove sale of proper	any dischargea dications as ne cation process ty, motions to	bility actions, j eded, relief fro , substitution o authorize reter	udicial lien avo m stay actions f collateral, fili tion of special	, motic ng mot couns	es, preparation and fili ons to redeem property ions to aprove profess sel, conversion to anot dversary proceeding.	y, sionals,
				CERT	FICATION				
	certify that the foregankruptcy proceeding		is a complete statemen	nt of any agreeme	nt or arrangement	for payment to n	ne for re	epresentation of the debtor	r(s) in
Ма	ay 1, 2024				/s/ Jay R. Lefk	ovitz			
Do	•				Jay R. Lefkovi	tz			
					Signature of Atto				
					LEFKOVITZ &	LEFKOVIIZ I VALLEY PLA(	îF.		
					NASHVILLE, T				
					615-256-8300	Fax: 615-255-4	<b>1</b> 516		
					jlefkovitz@lefl				
					Name of law firm	n ————————————————————————————————————			

In re	ELEVENONE, INC.			Case No.	ase No.		
		]	Debtor(s)	Chapter	11		
	LIST	OF EQUITY S	ECURITY HOLDERS	5			
Followi	ng is the list of the Debtor's equity security ho	olders which is prepar	red in accordance with rule 1	007(a)(3) f	or filing in this Chapter 11 Case		
	and last known address or place of ess of holder	Security Class	Number of Securities	]	Kind of Interest		
107 J	RIGHTMYER ASMINE CT in, TN 37066	COMMON STOCK	50%	;	SHARES OF STOCK		
107 J	C. RIGHTMYER ASMINE COURT50 in, TN 37066	COMMON STOCK	50%	;	SHARES OF STOCK		
DECL	ARATION UNDER PENALTY O	F PERJURY ON	N BEHALF OF CORP	ORATIO	ON OR PARTNERSHIP		
the for	I, the <b>OWNER</b> of the corporation naregoing List of Equity Security Holder			•	• • •		
Date	May 1, 2024	Signa	ture /s/ JOHN C. RIGHT				

Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

In re <b>ELEVENONE, INC.</b>		_ Case No.	
	Debtor(s)	Chapter	
VERIFICAT	ION OF CREDITOR I	MATRIX	
,			
I, the OWNER of the corporation named as the debtor	r in this case, hereby verify that th	e attached list of	f creditors is true and correct to
the least of our law to the			
the best of my knowledge.			
Date: May 1, 2024	/s/ JOHN C. RIGHTMYER		
	JOHN C. RIGHTMYER/OWNER		
	Signer/Title		

ELEVENONE, INC. 107 JASMINE COURT GALLATIN TN 37066

JAY R. LEFKOVITZ LEFKOVITZ & LEFKOVITZ 908 HARPETH VALLEY PLACE NASHVILLE, TN 37221

CELTIC BANK 268 S STATE ST SUITE 300 SALT LAKE CITY UT 84110

CORPORATION SERVICE COMPANY PO BOX 2576 SPRINGFIELD IL 62708

EFC WINDSONG LLC 2820 SELWYN AVENUE CHARLOTTE NC 28209

ERIN RIGHTMYER 107 JASMINE CT GALLATIN TN 37066

FORWARD FINANCE 53 STATE ST, 20TH FLOOR BOSTON MA 02109

JOHN C. RIGHTMYER 107 JASMINE COURT GALLATIN TN 37066

ONDECK 1400 BROADWAY NEW YORK NY 10018

In re	ELEVENONE, INC.		Case No.	
		Debtor(s)	Chapter	11
	CORPORA	TE OWNERSHIP STATEMENT (	(RULE 7007.1)	
recusa (are) c	al, the undersigned counsel for <u>ELI</u> corporation(s), other than the debtor	Procedure 7007.1 and to enable the Ju EVENONE, INC. in the above caption or a governmental unit, that directly sts, or states that there are no entities	ned action, certif or indirectly ow	ies that the following is a vn(s) 10% or more of any
Nor	ne [Check if applicable]			
May 1	1, 2024	/s/ Jay R. Lefkovitz		
Date		Jay R. Lefkovitz		
		Signature of Attorney or Litiga		
		Counsel for <b>ELEVENONE</b> , INC.	C.	
		LEFKOVITZ & LEFKOVITZ		
		908 HARPETH VALLEY PLACE NASHVILLE, TN 37221		
		615-256-8300 Fax:615-255-4516		
		jlefkovitz@lefkovitz.com		